

FEB 17 2006

PTO/SB/07 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number 10/660317		Filing Date 9-11-2003			
							Applicant(s) James G. Vanden Eynden					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	X		X									
2		X		X								
3		X		X								
4		X		X								
5		X		X								
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7		X		X								
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10		X		X								
11		X		X								
12		X		X								
13		X		X								
14	X		X									
15		X		X								
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50		X		X								
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Total Depend	31		29									
Total Claims	33		33									
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